

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Majority PAC</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00484642		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>Waterfront Strategies</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 25 / 2012		
Mailing Address 1010 Wisconsin Avenue, NW Suite 800			Amount <span style="border: 1px solid black; padding: 2px;">44056.00</span>		
City Washington State DC Zip Code 20007		Transaction ID : D419254			
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">834297.75</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px;"> </span>		
City State Zip Code		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President			
Purpose of Expenditure			Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span>					
<p>(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;">44056.00</span></p> <p>(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"> </span></p> <p>(c) <b>TOTAL</b> Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;">44056.00</span></p>					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Rebecca Lambe</p> <p>Signature _____ [Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 27 / 2012</p>					